

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED

2012 JAN 10 AM 11:24

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12 FEB 4 5 PM MAIL CENTER

Eighth Congressional District Republican Party of Minnesota

ADDRESS (number and street)

303 Douglas Avenue

☐ Check if different
than previously
reported. (ACC)

Eveleth

MN

55734 - 1511

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 0 0 3 6 1 4 8 5

3. IS THIS
REPORT

☐

NEW
(N)

OR

☒

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2)
- ☒ Mar 20 (M3)
- ☐ Apr 20 (M4)

- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)

- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)

- ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P)
- ☐ Convention (12C)

- ☐ General (12G)
- ☐ Special (12S)

☐ Runoff (12R)

Election on

MM / DD / YYYY

in the
State of

State

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G)

- ☐ Runoff (30R)

- ☐ Special (30S)

Election on

MM / DD / YYYY

in the
State of

State

5. Covering Period

MM / DD / YYYY

through

MM / DD / YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ronald L. Britton

Signature of Treasurer

Ronald L. Britton

Date

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE 1 OF 3
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
Eighth Congressional District Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Firside Inn			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Hwy 65 and Hwy 210			Allocated Activity or Event Year-To-Date		
City McGregor	State MN	Zip Code 55760	Date MM/DD/YYYY 02/08/2011		
Purpose of Disbursement: Executive committee meeting			Category/Type 001		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1800			3200		5000

B. Full Name (Last, First, Middle Initial) Range Office Supply			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 319 Chestnut St			Allocated Activity or Event Year-To-Date		
City Virginia	State MN	Zip Code 55792	Date MM/DD/YYYY 02/10/2011		
Purpose of Disbursement: Envelopes and index cards			Category/Type 001		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
2080			3697		5777

C. Full Name (Last, First, Middle Initial) Range Office Supply			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 319 Chestnut St			Allocated Activity or Event Year-To-Date		
City Virginia	State MN	Zip Code 55792	Date MM/DD/YYYY 02/11/2011		
Purpose of Disbursement: Binder combs for booklets			Category/Type 001		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
923			1640		2563

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4803		8537		13340

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

12030702971

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE 2 OF 3
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
Eighth Congressional District Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Range Office Supply			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 319 Chestnut St			Allocated Activity or Event Year-To-Date _____		
City Virginia	State MN	Zip Code 55792	Date MM / DD / YYYY 02 / 11 / 2011		
Purpose of Disbursement: Staples, paper clips			Category/Type 001		
Activity or Event Identifier: _____			Activity or Event Identifier: _____		
FEDERAL SHARE 402		NONFEDERAL SHARE 716	TOTAL AMOUNT 1118		

B. Full Name (Last, First, Middle Initial) Range Office Supply			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 319 Chestnut St			Allocated Activity or Event Year-To-Date _____		
City Virginia	State MN	Zip Code 55792	Date MM / DD / YYYY 02 / 21 / 2011		
Purpose of Disbursement: 3 toner cartridges and 1 case of paper			Category/Type 001		
Activity or Event Identifier: _____			Activity or Event Identifier: _____		
FEDERAL SHARE 18966		NONFEDERAL SHARE 33719	TOTAL AMOUNT 52685		

C. Full Name (Last, First, Middle Initial) Britton, Ronald			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 303 Douglas Ave			Allocated Activity or Event Year-To-Date _____		
City Eveleth	State MN	Zip Code 55734	Date MM / DD / YYYY 02 / 22 / 2011		
Purpose of Disbursement: Reimbursement for office rent for February 2011			Category/Type 001		
Activity or Event Identifier: _____			Activity or Event Identifier: _____		
FEDERAL SHARE 5547		NONFEDERAL SHARE 9861	TOTAL AMOUNT 15408		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE 24915	NONFEDERAL SHARE 44296	TOTAL AMOUNT 69211
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TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE _____	NONFEDERAL SHARE _____	TOTAL AMOUNT _____
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12030702972

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE 3 OF 3
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
Eighth Congressional District Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Grand Timber Bank			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Boc 220			Allocated Activity or Event Year-To-Date		
City McGregor	State MN	Zip Code 55760	Date MM/DD/YYYY 01/28/2011		
Purpose of Disbursement: Bank handling fee		Category/ Type 001			
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
180			320		500

B. Full Name (Last, First, Middle Initial)			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address			Allocated Activity or Event Year-To-Date		
City	State	Zip Code	Date MM/DD/YYYY		
Purpose of Disbursement:		Category/ Type			
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial)			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address			Allocated Activity or Event Year-To-Date		
City	State	Zip Code	Date MM/DD/YYYY		
Purpose of Disbursement:		Category/ Type			
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180		320		500

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
29898	53153	83051

12030702973

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 1/4/12
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Amo

PREPARER

(3/2005)

1/10/12

DATE PREPARED

12030702974